1682170

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOV 1 3 2003

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D₁₈₈

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number:

3235-0076

1.00

OMB Number: Expires:

May 31, 2005

Estimated average burden

hours per response

SEC US	E ONLY
refix	Serial
DATE R	RECEIVED
1	

Name of Offering (check if this is an amendment and name has changed, and indicate Common stock	e change.)			
Filing Under (Check box(es) that apply): Rule 504 Rule 505 [XX] Rule 506 So	ection 4(6) ULOE			
Type of Filing: [X] New Filing [] Amendment				
A. BASIC IDENTIFICATION DATA				
1. Enter the information requested about the issuer				
Name of Issuer (] check if this is an amendment and name has changed, and indicate Historical Autographs U.S.A., Inc.	e change.) 03038079			
Address of Executive Offices (Number and Street, City, State, Zip Code) 516 West Sprague Ave., Spokane, WA 99201	Telephone Number (Including Area Code) (509) 744-8590			
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code) Same			
Brief Description of Business Internet sales of historical documents	DDACESS!			
Type of Business Organization [X] corporation [] business trust [] limited partnership, already formed [] limited partnership, to be formed	other (please specify): NOV 17 200			
Actual or Estimated Date of Incorporation or Organization: Month Year	bbreviation for State:			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer, and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Eull Name (Last name first, if individual) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Eull Name (Last name first, if individual) Scott Wentzel Business or Residence Address (Number and Street, City, State, Zip Code) 516 West Sprague Ave., Spokane, WA 99201 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [X] General and/or Managing Partner Eull Name (Last name first, if individual) Ray Kuh Business or Residence Address (Number and Street, City, State, Zip Code) 516 West Sprague Ave., Spokane, WA 99201 Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Eull Name (Last name first, if individual) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Eull Name (Last name first, if individual) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner						
		owing:	100			
•		•	•	n of, 10% or moi	e of a	class of equity securities of
		•	•			, ,
			orporate general and man	aging partners of	partner	ship issuers; and
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[X] Executive Officer	[X] Director	[]	
Full Name (Last name first, it	findividual)	· · · · · · · · · · · · · · · · · · ·				
Cindy Swank						
Business or Residence Addre	ss (Number an	d Street, City, State, Zip	Code)			
516 West Sprague Ave., Sp	okane, WA 9920	01				
Check Box(es) that Apply:	[]Promoter	[] Beneficial Owner	[X] Executive Officer	[X] Director	[]	
Full Name (Last name first, it	f individual)					
Scott Wentzel						
Business or Residence Addre	ss (Number an	d Street, City, State, Zip	Code)			
516 West Sprague Ave., Spe	okane, WA 9920)1				
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[]	
Full Name (Last name first, is	f individual)					
Ray Kuh						
Business or Residence Addre	ss (Number an	d Street, City, State, Zip	Code)			
516 West Sprague Ave., Sp	okane, WA 9920)1				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[]	
Full Name (Last name first, i	findividual)					
Business or Residence Addre	ss (Number an	d Street, City, State, Zip	Code)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[]	
Full Name (Last name first, i	f individual)	,				
Business or Residence Addre	ss (Number an	d Street, City, State, Zip	Code)			
Check Box(es) that Apply: Partner	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[X] Director	[]	General and/or Managing
Full Name (Last name first, i	f individual)					

2

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(Number and Street, City, State, Zip Code)

Business or Residence Address

				B. IN	VFORMA	TION AE	OUT OF	FERING				
 Has the 	issuer sold.	or does the	issuer inter	nd to sell, to	non-accre	dited invest	ors in this o	ffering?				Yes No[] [X]
								g under UL(
2. What is	the minimu	m investme	ent that will	be accepte	d from any	individual?	[Some one	e-half units r	nay be sold]		
3. Does the	e offering po	ermit joint o	ownership o	of a single u	nit?		******************		*******************		,,,,,	Yes No[X] []
4. Enter the similar is an broke the in	e information remunera associated per or dealer.	on requested tion for solution or as Derson or as If more the or that brok	d for each picitation of gent of a bran five (5) are ror dealer	person who purchasers oker or dea persons to l r only.	has been o in connecti ler registere be listed are	r will be pa on with sale ed with the associated	id or given, es of securit SEC and/or persons of	directly or lies in the of with a state such a broke	indirectly, a fering. If a or states, l er or dealer	any commis person to b ist the name, you may s	ession or be listed e of the et forth	
Full Name (NONE	Last name	first, if indi	vidual)									
Business or	Residence .	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of As	sociated Br	oker or Dea	aler									
States in WI (Check	nich Person 'All States"	Listed Has or check ir	Solicited ondividual St	r Intends to	Solicit Pur	chasers						[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nume (Last name	first, if indi	vidual)	· · · · · · · · · · · · · · · · · · ·								
Business or	Residence	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of As	sociated Br	oker or Dea	aler		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u>-</u>					
States in WI (Check	hich Person "All States"	Listed Has	Solicited on	r Intends to	Solicit Pur	rchasers		,,				[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last name	first, if indi	vidual)									•
Business or	Residence	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of As	ssociated Br	oker or De	aler									
States in W (Check												[] All States
[AL] [IL] [MT] [R]]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	E OF PROCEE!	DS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity (Common Stock and Warrants)	\$***	\$
	[XX] Common [] Preferred		
	Convertible Securities	S	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$***	\$**
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	72	\$**
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities of this offering. Classify securities by type listed in Part C - Question 1.	Type of Security	Dollar Amount Sold
	Type of offering		
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[]	S2
	Printing and Engraving Costs	. []	\$

*** This Form D is being filed in connection with a reorganization in which the Issuer issued 11,930,598 shares of its common stock to the stockholders of Arbios Technologies, Inc. in exchange for all of the issued and outstanding shares of capital stock of Arbios Technologies, Inc. None of the Arbios Technologies, Inc. stockholders paid any cash for any of the Issuer's stock, and all expenses listed above relate to expenses incurred in connection with the reorganization.

10,000

15,000(***)

[]

[]

[]

[]

[]

Legal Fees

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify)

Total

С.	OFFERING PRICE, N	UMBER OF INVESTORS, EX	PENSE	S AND USE OF	PROCEE	DS	
4. b. Enter the dif Part C - Question 4.a. This differ	ference between the aggreg on I and total expenses furn ence is the "adjusted gross p	ate offering price given in response ished in response to Part C - Questio roceeds to the issuer."	to on 			\$	N/A***
5. Indicate belo proposed to be purpose is not estimate. The t the issuer set fo	w the amount of the adjuste used for each of the purp known, furnish an estimate otal of payments listed mus rth in response to Part C - Q	ed gross proceeds to the issuer used oposes shown. If the amount for around check the box to the left of the equal the adjusted gross proceeds question 4.b above.	or iy ie to				
				Payments to Officers, Directors, & Affiliates		Pa	yments To Others
Salaries and	fees		[]	\$	[]	\$	
Purchase of	real estate		[]	\$	[]	\$	
Purchase, re	ental or leasing and installati	on of machinery and equipment	[]	\$	[]	\$	·····
Constructio	n or leasing of plant building	gs and facilities	[]	\$	[]	\$	
in this offer	ing that may be used in excl	the value of securities involved lange for the assets or securities	[]	\$	[]	\$	
Repayment	of indebtedness		[]	\$	[]	\$	·
Working ca	pital (including salaries)		[]	\$	[]	\$	
Other(speci manufactur	fy): <u>Pre-clinical studies, clin</u> ng facility	nical research, and a cell	[]	\$	[]	\$	
			-	\$	[]	\$	
Column To				\$	[]	\$	
Total Paym	ents Listed (column totals a	ided)			[]	\$ 1	V/A***
	<u></u>	D. FEDERAL SIGNAT	TURE				
signature constitutes a	n undertaking by the issue	ed by the undersigned duly authorizer to furnish to the U.S. Securities a redited investor pursuant to paragrap	ınd Exch	ange Commission.	s filed under upon writter	Rule 50 n reques	05, the following t of its staff, the
Issuer (Print or Type)		Signature ·	\supset	Date: Octo	ober 30, 2003	3	
Historical Autographs	U.S.A., Inc.	Cindy Ve	an				
Name of Signer (Print	or Type)	Title of Signer (Print or Type)					
Cindy Swank		President					

This Form D is being filed in connection with a reorganization in which the Issuer issued 11,930,598 shares of its common stock to the stockholders of Arbios Technologies, Inc. in exchange for all of the issued and outstanding shares of capital stock of Arbios Technologies, Inc. None of the Arbios Technologies, Inc. stockholders paid any cash for any of the Issuer's stock, and, accordingly, there were no adjusted gross proceeds from the issuance of the shares.

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

E. STATE SIGNATURE		
Is any party described in 17 CFR 230.262(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	Yes []	No [X]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date: October 30, 2003
Historical Autographs, Inc.	Cindy want
Name of Signer (Print or Type)	Title of Signer (Fint or Type)
Cindy Swank	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	**** * * * * * * * * * * * * * * * * * *			APPEN	NDIX						
1	to non-a	2 nd to sell accredited rs in State B-Item 1)	3 Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
MT		×	common stock	2	N/4						
NE											
NV		×	Common stack	1	N/A						
NH											
NJ		×	Common Stock	3	N/4		1				
NM					•						
NY		×	Common stock	3	NA						
NC											
ND											
ОН											
OK											
OR		×	Common spok	4	NIA						
PA											
RI											
SC											
SD											
TN											
TX											
UT											
VT		,									
VA											
WA		×	common stack	1	N/A						
WV											
WI					······································						
WY											
PR											
Foreign											

APPENDIX

1		2	3		4			Disqua	5 lification
	to non-a	nd to sell accredited rs in State B-Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of in amount purch (Part C-	vestor and lased in State Item 2)		(if yes explan	ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL								····	
AK									
AZ									
AR					ļ				
CA		×	Common stock	36	N/A N/A N/A				
CO		\times	Common stock		N/A				
CT		×	Common stock		N/A				
DE									
DC					,				
FL		×	Common stook	2	N/A				
GA									
HI			1074					_	
ID		\times	Common stok		NA				
IL									
IN									
IA					 				
KS								-	
KY									
LA									
ME								_	
MD									
MA									
MI									_
MN									
MS				1	41/-				
MO		×	common stock		N/A				